	Under the Paperwork Redu	ction Act of	1995, no persons are required	to respond to a collec	ction of information un	less it displays a va	lid OMB control number.					
STRE	Effect	ive on 12/08	/2004.	Complete if Known								
ſ	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Numbe	10/632,660							
FEB 2	FEE TRANSMITTAL الع			Filing Date	July 31, 2003							
TO PRAIS	for	2006	First Named Invent	or Yehuda Azenkot	et al.							
RE PRACE	Applicant claims small entity status. See 37 CFR 1.27			Examiner Name	Tu, Christine T.							
	TOTAL AMOUNT OF PA	AYMENT	(\$) 620.00	Art Unit	2138							
1				Attorney Docket No	0. 034704-068							
ſ	METHOD OF PAYMENT (check all that apply)											
Ì	☐ Check ☑ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :											
	Deposit Account Deposit Account Number: 50-1698 Deposit Account Name: Thelen Reid & Priest LLP											
	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
	☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee											
	Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
	FEE CALCULATION											
ľ	1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
		FILING		EARCH FEES		EXAMINATION FEES Small Entity						
	Application Type	Fee (\$)	Small Entity Fee(\$) Fe	Small E		Fee(\$)	Fees Paid (\$)					
	Utility	300	150 50		200	100						
- 1	Design	200	100 10	0 50	130	65						
•	Plant	200	100 30	0 150	160	80						

2. EXCESS CLAIM FEES	<u>s</u>	Small Entity			
Fee Description				<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (including Reissues)	50	25			
Each independent claim over 3 (including Re	200	100			
Multiple dependent claims	360	180			
Total Claims Extra Claims	Fee(\$)		Fee Paid (\$)	Multiple Dependent Claims	
20 or HP= x		=		<u>Fee (\$)</u>	Fee Paid (\$)
HP = highest number of total claims paid for, if gre					
Indep. Claims Extra Claims	Fee(\$)		Fee Paid (\$)		

250

0

600

300

0

Small Entity

HP = highest number of independent claims paid for, if greater than 3.

Thomas Van Zandt

300

200

150

100

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3. APPLICATION SIZE FEE

- 3 or HP=

Reissue

Name (Print/Type)

Provisional

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

500

0

Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets - 100 = _____ / 50 = _ (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Ext. Fee \$225; RCE \$395 \$620

SUBMITTED BY Registration No. 408.292.5800 Telephone 43,219 Signature (Attorney/Agent) February 20, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.